

POSITIVE

LECTION

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DOE/PASO
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BNL FOLDER #3
FY 1979
MEDICAL PROGRAM

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Appendix I
Medical Trip Report
Brookhaven National Laboratory
January-February 1979

This appendix will cover only the portion of the survey supported by the ship Liktanur II, chartered from U.S. Oceanography.

On January 26, 1979, Mr. Charles Otterman (C.O.), president of U.S. Oceanography and Mr. Harry Brown (H.B.), DOE/PASO representative, arrived on Kwajalein via MAC. I met them at the airport and asked that we get together as soon as possible to plan for the upcoming out-island survey. They stated that the ship would arrive early Saturday morning - about 0800 - and that I was requested to keep the medical survey team - including myself - away from the ship because of the heavy work schedule and danger to observers - for three days. After three days we could visit the ship. I stated that there were many things that needed to be done to mesh the medical team and the crew of the vessel. H.B. asked me to pass all requests directed to the crew through him. I agreed. On Saturday and Sunday a number of friends from Kwajalein went down to see the vessel - from the pier. I was informed there didn't seem to be the frantic activity that would have precluded my visiting the ship.

On Monday the 29th, I finally persuaded H.B. that I needed to see how the ship was set up. When I went aboard, I found the ship to be quiet and I commenced my inspection.

The trailers constructed by E&N looked good. I pointed out that Bill Scott, patient coordinator, would have a table at the forward base of the deck crane. Immediately forward of his position our thyroid specialist, John Nicoloff, M.D. (President of the American Thyroid Association), would need a table set up between the trailers - to perform his examinations - and

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forward of that position we would need another table set up to draw blood and make slides prior to moving the patients to x-ray (please see diagram). Since all of these positions were on the exposed well deck, I inquired about the canvas cover for this entire area - that we had all discussed in San Diego prior to the initial negotiations. I was assured by C.O. that this was "no sweat" "we'll rig them when we get to the islands". I accepted his assurance.

I then inquired about the barges. I was informed that C.O. and H.B. knew that the barges were on Kwajalein - but they hadn't looked for them. At this time I was informed that if I wanted to "insist" on using the barges that there would be "at least a two week delay". I asked them what the expected sailing date was - without the barges - I was informed that the earliest date would be February 2nd - nine days late. Since our physician consultants were on their way - scheduled to arrive on Kwajalein on January 31st, I informed them that we couldn't expect to hold the team for twelve days and that we should proceed on the 2nd. I also informed H.B. that I was very disappointed that the barging concept had failed to materialize. I reminded him that when Wayne Munk, H.B., and I were in San Diego during the initial review of the ship, that I felt the ship was "marginal" but that the barging concept swung the balance in favor of U.S. Oceanography. I asked H.B. who had made the decision not to do the required modifications in Honolulu to support the barges. H.B. said "that was my decision - if you don't like it, I am responsible". I indicated to him that I was aware that the ship had been in port, in Honolulu, for about twenty-four days before leaving for Kwajalein. During this period of time, I passed through Honolulu - on my way to Majuro. In fact, I met with H.B. and Bill Stanley in the DOE office for a meeting - and was never informed of this very important change in plans. While in port, among the "critical items" installed were a very large automatic ice machine and a gas

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barbecue grill. I indicated to H.B. that I "didn't like" the work priorities on the ship - prior to its arrival on Kwajalein. From that point on, communications between H.B. and myself were strained at best. It seemed to me, as well as a number of other observers on Kwajalein, that H.B. had become, in essence, a member of C.O.'s crew. His role, as I understood it initially, was to serve as an impartial mediator and liason for the BNL/U.S. Oceanography trip.

In fact, on February 1st, the night before we sailed, (C.O.) had a party for his crew and their families at the Yokwe Yuk Club - H.B. sat at his left hand. The party was loud and boisterous. C.O. frequently used profane language and both H.B. and C.O. were heard to make some "very disparaging and vicious personal remarks about you (Dr. Pratt)" - during the meal. These remarks were overheard by Mr. and Mrs. Frank Cataldo, sitting at the next table. On the way out of the dining room, the Cataldo's stopped by to inform me of the situation. The following day several other friends on the island informed me that C.O. had made himself - and unfortunately some of his crew - persona-non-grata on Kwajalein - by their actions.

Shortly before we were to sail, R. DeBrum, our outer island pilot, was "taken ill". H.B. then went directly to Paul LaPointe and indicated he (H.B.) was going to request Paul's services for the trip. Mr. LaPointe refused to go. I would suggest DOE contact Mr. LaPointe directly to ascertain exactly what made him take this action. The ship therefore sailed without an outer island pilot.

During the fourteen days the medical team was aboard, a number of serious problems arose. I attempted to discuss these problems either with H.B. alone, or with H.B. and C.O. together (they were together much of the time).

I have categorized the problems in the following areas:

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1. Charter-Contract
2. Ship-Safety
3. Crew
4. DOE/PASO Liason
5. Medical Team Problems

1. Charter-Contract

A. I have discussed at some length the problem with the lack of "walk on capability" offered by U.S. Oceanography in their proposal (enclosure I). H.B., C.O., and I discussed an alternative method of patient transfer via the DOE Boston Whalers. (The ship had failed to bring their two whalers - listed as ship's equipment in their proposal.) The DOE Whalers, I had been informed by the Global marine department, were in "bad shape" yet they were the only available boats for patient transfer. I indicated that if at anytime I felt the operation was hazardous, I would stop the transfer - and if necessary abort the trip - or move operations to the island - a very poor alternative, since one of our prime goals on this survey was chest x-rays. After vigorous urging, the ship fabricated a raft to fit under the gangway so that the patients could step from the boat to a semi-stable 8x8 platform before they climbed up the gangway. On shore the boat was beached and the patients handed in over the bow. At low tide this was a difficult task.

B. When we reached Rongelap - and it began to rain - I asked repeatedly for a tarpaulin to protect the patients and the medical staff - a series of make-shift pieces of canvas were rigged but they were barely adequate - especially with the high winds. I repeatedly asked if they had spare canvas and a grommet machine and was told they had one - but I never saw it used. The user's dining area - aft on the 0-1 level was completely open. I had commented on this in San Diego and was told a series of canvas panels would be fabricated to protect this area from the wind and rain when we needed it.

We frequently needed protection during the fourteen days, but no effort was made to rig protective canvas. (I doubt if it was available.)

C. In San Diego we agreed a waiting bench would be installed in the forecastle - for patients waiting to go down to x-ray. The bench was never installed. I had to repeatedly ask to move the motorcycle stored there to make room for the patients.

D. It was agreed that a second shaving mirror would be installed over the sink in the laboratory to handle the fourteen men all getting up at the same time. That mirror was never installed as requested.

E. My plans called for an x-ray pass through box to be installed in the wall of the developing room to facilitate the x-ray procedure. No space was left for the box and we were forced to put it in a corner - greatly limiting its usefulness.

F. The storage space allotted to the medical party was totally inadequate. Apparently H.B. had failed to pass on to C.O. our logistic letter - giving some idea of our storage requirements. As our gear came aboard, C.O. became more and more agitated and finally ordered the island food gifts to be stored beneath the medical party's bunks - leaving no room for storage of the medical party's baggage.

The ship's brochure stated a two ton freezer capacity - yet the perishable fruit for the islands was kept in the medical berthing area and many oranges rotted.

2. Ship-Safety

A. Throughout the entire cruise, no organized safety drill or instruction was given by the ship. We were not informed where the life vests were stored or how to use the life rafts. (Many of the medical party were

weak or non-swimmers.)

B. There were no fire extinguishers in the medical party berthing area.

C. Egress from the berthing area was through one hatch, leading forward through a high hazard area, i.e. the x-ray and laboratory areas (containing inflammable chemicals and high voltage) - then up a ladder and aft into the well deck. A second hatch leading aft went through a cluttered machine shop, into the battery room with no egress.. There was no outside ventilation into the berthing area that I could find.

D. The water tight hatch controlling the medical berthing area had no latch. When trying to pass through the hatch in high seas, the heavy hatch swung violently. A piece of cord was finally tied to the hatch to keep it open.

E. The outboard passageways, both port and starboard, on the main deck level required climbing over a totally exposed - fore and aft ladder with no safety lines. Since our passage was in heavy weather with severe rolling and pitching, we could easily have lost one of our party over the side and never have missed them. (see pictures)

F. From a health standpoint, the berthing area was inadequate. Dr. Pratt's bunk was under the air conditioner unit and throughout the first night he was drenched by ice cold water, two to four ounces about every hour (as the condensation pan would overflow). In addition, Dr. Nicoloff complained repeatedly about the "stagnant air in the berthing compartment". The medical team was either freezing or too hot.

3. Crew

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A. Ed Jones, the designated and registered captain of this vessel and I spent at least two hours discussing his problems with Mr. Otterman. He stated he had "never seen a shipboard operation like this one ... the crew is confused about who is running the ship". He was registered in Honolulu as the captain and he stated that C.O. did not have master's papers - and was using his (Ed Jones). The Captain was used as a deck hand - and frequently addressed in an insulting manner by C.O. in my presence. On February 19, 1979, I heard he was ready to leave the ship and ask for a job with Global. In addition, I understand one other crew member is about to leave.

B. After an altercation between H.B., C.O., and myself - C.O. personally served breakfast to the medical group - very unctuously. The cook apologized to me after breakfast for C.O.'s actions, stating C.O. was acting "childish" - I agreed.

C. On February 12, 1979, John and Ruth Nicoloff told me the crew was getting "bad vibes" from the people of Utirik regarding their treatment at sick call. I investigated further and discovered that it was C.O. who had passed this information on to the Nicoloffs. He stated the medical team was getting some "bad public relations" ashore from Bill Grant's actions at sick call. I then called H.B. and C.O. together and told them that if they had any such comments to make regarding the opinions of the people toward the medical group - that they were to speak to me directly - not to our consultants first. H.B. stated at this time he could give me a written statement that Grant was taking gin ashore to sick call.

D. At Utirik the unloading of a large quantity of food gifts stored in hold #2 - the medical berthing area - was hand carried by the medical team (including most of the doctors) - while the ship's crew watched.

E. The ship carried a cannon - a close replica of the old "boarding

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cannons" used on old sailing ships to protect the gangway. This cannon was mounted just forward of the gangway on the Liktanur II.

On February 6, 1979 - sometime after 2100 - the cannon was fired twice (I understand with $\frac{1}{2}$ pound of black powder). The cannon was loaded with "toilet paper and tin foil" and was fired "aft". Since the side the cannon was on was parallel with the shore - the flash must have been directed toward some part of the island. I was asleep in hold #2 at the time and didn't perceive the noise as a cannon shot. On February 7, 1979, the cannon was fired again after 2100 with the same load. However, on this occasion, immediately following the boom, a seven year old child cried out and stated he was struck by a projectile from the cannon. I understand he continued to cry for some time. Again I was below deck, asleep, and unaware of what was going on. The boy's father was very upset that the DOE ship would injure his son. When I was informed of this episode the following morning, I confronted H.B. and C.O. with this episode, and H.B. said "the boy was lying", and became very angry because I was questioning him about the matter. He stated he had checked with the magistrate and there was "no problem". I then checked with the magistrate (Nick) and he said to forget it "no harm was done". I asked to see the boy and his father to apologize but Nick said that wasn't necessary - the boy was his nephew.

F. While the medical team was working aboard ship, H.B. and C.O. were busy "making friends" ashore. In fact, C.O. assisted in the feeding of the magistrate's (Nick's) infirmed father ashore. During the same period, C.O. bought up most of the worthwhile handicrafts ashore - before the medical team could select - and they were left with the worst goods. Many fishing balls were given to the ship's crew - none to the medical team. I think this is a good time to bring up one of the most serious problems encountered in the

entire survey. As you are all aware, the Brookhaven National Laboratory medical team has had some very difficult times - from a public relations standpoint - in the past. Their medical care has been excellent - but we have encountered some very bad public relations - for a variety of reasons. I informed our medical group that we had two goals - good medical care and good public relations. I hoped that public relations would be integrated with the ship - as it has been in the past. However, C.O. - supported by H.B. - seemed to set up a "ship's public relations" - apart from the medical team. On one occasion, I discovered C.O. passing out candy to the children. We had specifically requested the team to refrain from giving candy ashore due to the severe medical problems of diabetes and dental caries. I had a meeting with H.B. and C.O. and H.B. became furious - demanding that I put the request "in writing". I did and he now has that document. I also asked them to check with me before any more food stuffs were sent ashore. The result of this conflict was that C.O. mounted his own public relations program. He is a strong entrepreneur - and his program was a unilateral one - to the detriment of the medical program. The people of the islands, I was informed by our Marshallese nurse, were very aware of the conflict between the ship and the medical party and were curious as to its cause. However, C.O. was giving gifts - and the medical group was essentially isolated and the "good guys" appeared to be the ship's crew and H.B..

This problem was most prevalent on Rongelap but was also present, to a limited degree on Utirik. I consider that this unilateral public relation program contributed to a decrease in the credibility and stature of the Brookhaven National Laboratory medical group. I sincerely regret that this situation was allowed to develop and feel it was detrimental to DOE and BNL.

The ship gave the magistrate an autographed picture of the ship in

his harbor inscribed "to our friend Nickodemus from the crew of the Liktanur II". In addition, Nick and some others were given "Egabrag" (garbage - spelled backwards) t-shirts - worn by the entire crew - including H.B.. I had previously been chided by Oscar DeBrum that DOE was sending out a "garbage scow" as our "hospital ship". He was semi-serious - and several other Marshallese and Americans made this same observation.

4. DOE/PASO Liason

Note: Many, or most of the previous problems involved or were discussed with Harry Brown with marginal success. In addition to the previously mentioned problems with H.B.:

A. He failed to provide towels for the medical team - some towels were found in the medical supplies but they were in short supply.

B. He failed to pass to C.O. the survey logistic letter - so that when the supplies arrived C.O. blamed the medical team for the storage problem.

C. H.B.'s insistence that I deal only with him placed a block between the ship and the scientific party. As a result, the ship position, at anchor at Rongelap and at Utirik was not in the best position in the opinion of the medical party - some of whom have been coming out here for twenty years. In addition, C.O. asked the Marshallese medical team through H.B. to assist him in piloting the ship into harbor at Rongelap and Utirik. Dr. John Iaman was not happy with this request but attempted to help.

At Utirik the advice of the Marshallese was ignored and the ship missed the narrow pass by two hundred yards (south). The ship just got over the reef with four feet to spare. As we approached the reef we saw a Marshallese boat coming toward us through the pass. If we had waited thirty minutes off shore we could have had a pilot. Instead, the ship was placed in great hazard.

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After we crossed the reef, the ship dropped anchor and the Marshallese boat tied up - astern. Five Marshallese were in the boat. They were not invited aboard - a common courtesy - on any ship. Finally, one man was asked aboard to serve as a pilot across the atoll. I later found out the man at the tiller of the Marshallese boat was the new magistrate of the island. I found this a breach of common courtesy and very embarrassing.

5. Medical Team Problems

A. H.B. and C.O. were aware of my problems with Dr. Bill Grant and my attempts to solve those problems. On the last day at Utirik, I went ashore and spent four hours in sick call, assisted by Dr. John Iaman. We delivered a large amount of drugs and medical equipment and supplies to the health aid - but when I left at noon - at least twenty patients were still waiting. I had been informed by C.O., the prior day, that a large storm was moving toward Utirik and he advised leaving a day ahead of our scheduled departure. I agreed to this because we had discovered a pre-eclamptic lady who needed to be evacuated to Kwajalein as soon as possible - with the least amount of trauma. In light of the weather forecast I decided to leave early. I am afraid some of the people thought we were deserting them. In addition, the island had planned a "going away" party for the team the evening of our departure. We attempted to have a combined BNL/Island party the evening before departure but the magistrate had not understood that we were leaving early. C.O. had an expensive weather facsimile recorder in his stateroom and I presumed the forecast was accurate.

The trip back to Kwajalein was relatively smooth. The pre-eclamptic lady delivered her child at sea at 2230 the evening of departure. Her mother was accompanying her. After the child was delivered, the grandmother took charge of the baby until she became seasick. I then suggested to H.B. that

since we were running down wind in a quartering sea, we might alter course to Roi Namur - which would put us on a course almost dead ahead of the wind and give the patients a smoother ride. He considered the idea but no change in course was ordered. The ship followed the longest approach route to Echo Pier - estimated to be four hours longer than entry through Meck Pass.

Charter-Contract
Summary

The previous listing and discussions of the problems, as I saw them, is submitted to serve as documentation of the problems and hopefully to stimulate a meeting where these problems can be discussed and pre-empted in the future.

I have asked to see a copy of the contract between DOE/H&N and U.S. Oceanography and have been unable to see one. I would like to know what percentage of the U.S. Oceanography contract budget is being charged to the Brookhaven National Laboratory Marshall Islands Medical Program and if any penalty clauses were written into that contract.

Since I was aware that Mr. C. Otterman was a flamboyant entrepreneur who liked to wine and dine and otherwise entertain his prospective clients - I informed Harry Brown that I wanted to keep our dealings (H.S.P. and C.O.) on a strictly business level. I would accept no gifts from Chuck Otterman. I hope that other DOE personnel have been able to resist his charming offers of "hospitality".

As I informed Harry Brown, I respect Mr. Otterman's accomplishments, but I do not respect his methods of operation.

Hugh S. Pratt, M.D.
Director - Marshall Island Project
Brookhaven National Laboratory

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2. Ship-Safety

Enclosure-4

A. Throughout the entire cruise, no organized safety drill or instruction was given by the ship. We were not informed where the life vests were stored or how to use the life rafts. (Many of the medical party were weak or non-swimmers.)

B. There were no fire extinguishers in the medical party berthing area.

C. ~~From~~ from the berthing area was through one hatch, leading forward through a high hazard area, i.e. the x-ray and laboratory areas (containing inflammable chemicals and high voltage) - then up a ladder and aft into the well deck. A second hatch leading aft went through a cluttered machine shop, into the battery room with no egress.. ~~There was no exit from the battery room into the berthing area.~~

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